



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

REGION VII
726 MINNESOTA AVENUE
KANSAS CITY, KANSAS 66101

OCT 31 1989

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Mr. Chuck Trombold
General Manager
Hydrocarbon Recyclers, Inc.
2525 North New York
Wichita, Kansas 67219

REQUEST FOR INFORMATION

Dear Mr. Trombold:

Under § 3007 of the Resource Conservation and Recovery Act (RCRA), Title 42 U.S.C. § 6927, the Environmental Protection Agency (EPA) may require you to furnish information relating to wastes and waste management practices at your facility. Pursuant to § 3007 of RCRA, for the purposes of determining compliance and possible enforcement, EPA hereby requires that you respond to the following questions in writing within fifteen (15) days of receipt of this letter.

Information Requested

1. For each hazardous waste received by HRI from Exline, Inc. of Salina, Kansas, between August 8, 1988 and the present, provide to EPA copies of all notifications, demonstrations, waste analysis data, and other documentation produced by Exline pursuant to 40 CFR § 268.7.
2. For each hazardous waste received by HRI from Exline, Inc. between August 8, 1988 and the present, provide to EPA copies of any and all analysis done according to HRI's waste analysis plan.
3. For each hazardous waste received by HRI from Exline, Inc., between August 8, 1988 and the present, provide to EPA a description of any treatment received by the waste and ultimate disposition of the waste.
4. Provide to EPA a copy of all manifests for offsite shipments of waste from HRI to a disposal facility. This request is limited to Exline's waste and any waste it was comingled with, received by HRI between August 8, 1988 and the present.



R00001629
RCRA Records Center

You may, if you desire, assert a business confidentiality claim covering part or all of the information submitted to, or reviewed by, EPA. Such a claim may be made by placing on (or attaching to) the information, at the time of its submittal to, or review by EPA, a cover sheet, stamped or printed legend, or other suitable form of notice employing language such as "trade secret," "proprietary," or "company confidential." Allegedly confidential portions of otherwise non-confidential documents should be clearly identified and may be submitted separately to facilitate identification and handling by EPA. If confidential treatment is sought only until a certain date or until the occurrence of a certain event, the request should so state.

Information submitted for which a claim of confidentiality is made will be disclosed by EPA only to the extent and by the means authorized by the procedures specified in 40 CFR Part 2, Subpart B (1985), as amended by 50 Federal Register 51654 December 18, 1985. If no such claim is made when information is received by EPA, the information may be made available to the public without further notice.

Please note that you are required to submit this information within fifteen (15) days of receipt of this letter. The response must be submitted to:

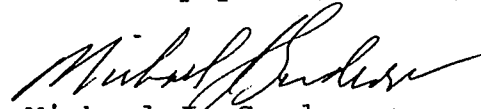
U.S. Environmental Protection Agency
726 Minnesota Avenue
Kansas City, Kansas 66101
Attn: C.L. Hutchison, RCRA/RCOM

Should you require a longer period to respond to the information request, you may be granted a one-time extension of 15 days. To request an extension you must contact Cynthia L. Hutchison at (913) 236-2891.

Failure to respond to these questions within 15 days of receipt of this letter may subject you to an enforcement action under § 3008 of RCRA, 42 U.S.C. § 6928. Such enforcement action may include the assessment of penalties of up to \$25,000 for each day of noncompliance.

Should you have any questions concerning this matter, please contact Cynthia L. Hutchison, of my staff, at (913) 236-2891.

Sincerely yours,


Michael J. Sanderson
Chief, RCRA Branch

cc: Tom Gross, KDHE

HRI



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

OCT 31 1989

REGION VII
726 MINNESOTA AVENUE
KANSAS CITY, KANSAS 66101

RECEIVED

NOV 7 1989

RCOM SECTION

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Mr. Chuck Trombold
General Manager
Hydrocarbon Recyclers, Inc.
2525 North New York
Wichita, Kansas 67219

REQUEST FOR INFORMATION

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3. For each hazardous waste received by HRI from Exline, Inc., between August 8, 1988 and the present, provide to EPA a description of any treatment received by the waste and ultimate disposition of the waste.

4. Provide to EPA a copy of all manifests for offsite shipments of waste from HRI to a disposal facility. This request is limited to Exline's waste and any waste it was comingled with, received by HRI between August 8, 1988 and the present.

Done
CT

Done
CT

No treatment.
Material shipped
in bulk for
secure hazardous
waste landfill

Done
CT

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. K S D O 0 7 1 1 2 7 1 3 2 7 1 0 0 0 1 1 9		Manifest Document No. 1000119		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.							
3. Generator's Name and Mailing Address EXLINE, INC. P. O. BOX #1487 - SALINA, KS 67402-1487						A. State Manifest Document Number									
4. Generator's Phone (913) 825-4683						B. State Generator's ID									
5. Transporter 1 Company Name USPCI						C. State Transporter's ID									
6. US EPA ID Number 1 0 K D 9 8 1 1 5 1 4 4 7 4						D. Transporter's Phone									
7. Transporter 2 Company Name						E. State Transporter's ID									
8. US EPA ID Number						F. Transporter's Phone									
9. Designated Facility Name and Site Address HRT 2549 N. NEW YORK AVE. WICHITA, KS 67219-4322						G. State Facility's ID									
10. US EPA ID Number K S D O 0 7 2 4 6 8 4 6						H. Facility's Phone									
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)						12. Containers		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.			
a. HAZ WASTE SOLID N.O.S. F006 ORM-E, NA 9189, (0039) RQ=1#						3 DM		11039		P		F006			
b.															
c.															
d.															
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above									
15. Special Handling Instructions and Additional Information															
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.															
Printed/Typed Name Jim Kochevar						Signature Jim Kochevar						Month Day Year 10/8/15/89			
17. Transporter 1 Acknowledgement of Receipt of Materials						Printed/Typed Name GARY DORMAN						Signature Gary Dorman		Month Day Year 10/8/15/89	
18. Transporter 2 Acknowledgement of Receipt of Materials						Printed/Typed Name						Signature		Month Day Year	
19. Discrepancy Indication Space															
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.															
Printed/Typed Name KENNETH K. ROBERTSON						Signature Kenneth K. Robertson						Month Day Year 10/8/15/89			

HYDROCARBON RECYCLERS, INC.-WICHITA
MATERIAL RECEIPT RECORD

Page 1 of 1

Generator Exline, Inc.

Customer Code E-06

Manifest/Order# 00019

Date Received 8/16/89

Line 11-A Page 1 Lab Code 892254 Quantity (3 dms. 1039 gal. (lbs))

Product H.W.S. NOS. CLIN _____ Waste Code(s) F006

Solids (in.) 78" spg. solid pH 7.0 Normality _____

Sniffer ✓ Flashpt. (°F) _____ Ignitability (+ \ -) _____

Bielstein Neg. % Cl (wt.) _____ BTU/lb. _____

Compatibility _____ PCB (ppm.) _____ % Yield _____

Disp. Codes: Wasteform N91 TSDR (ON SP2 OFF MTC RS _____)

HWPS# 024194 Misc. _____

LF

Recommendation

FO06

Tank# land fill

Line _____ Page _____ Lab Code _____ Quantity (_____ dms. _____ gal. \lbs.)

Product _____ CLIN _____ Waste Code(s) _____

Solids (in.) _____ spg. _____ pH _____ Normality _____

Sniffer _____ Flashpt. (°F) _____ Ignitability (+ \ -) _____

Bielstein _____ % Cl (wt.) _____ BTU/lb. _____

Compatibility _____ PCB (ppm.) _____ % Yield _____

Disp. Codes: Wasteform _____ TSDR (ON _____ OFF _____ RS _____)

HWPS# _____ Misc. _____

Recommendation

Tank# _____

Line _____ Page _____ Lab Code _____ Quantity (_____ dms. _____ gal. \lbs.)

Product _____ CLIN _____ Waste Code(s) _____

Solids (in.) _____ spg. _____ pH _____ Normality _____

Sniffer _____ Flashpt. (°F) _____ Ignitability (+ \ -) _____

Bielstein _____ % Cl (wt.) _____ BTU/lb. _____

Compatibility _____ PCB (ppm.) _____ % Yield _____

Disp. Codes: Wasteform _____ TSDR (ON _____ OFF _____ RS _____)

HWPS# _____ Misc. _____

Recommendation

Tank# _____

Line _____ Page _____ Lab Code _____ Quantity (_____ dms. _____ gal. \lbs.)

Product _____ CLIN _____ Waste Code(s) _____

Solids (in.) _____ spg. _____ pH _____ Normality _____

Sniffer _____ Flashpt. (°F) _____ Ignitability (+ \ -) _____

Bielstein _____ % Cl (wt.) _____ BTU/lb. _____

Compatibility _____ PCB (ppm.) _____ % Yield _____

Disp. Codes: Wasteform _____ TSDR (ON _____ OFF _____ RS _____)

HWPS# _____ Misc. _____

Recommendation

Tank# _____



U.S.
POLLUTION
CONTROL, INC.

HAZARDOUS WASTE PROFILE SHEET

024194

EXHIBIT A TO

Contract Dated

As prescribed by the Resource Conservation and Recovery Act (Public Law 98-580 Sec. 3004), a detailed chemical and physical analysis must be submitted before we can handle your waste stream. This information is necessary to help us evaluate whether we can safely and economically transport and dispose of your controlled industrial wastes in an environmentally sound manner. Be as complete as possible. If an area is not applicable, mark as such. Should a laboratory analysis be available, please attach it to this form. We can arrange analytical laboratory services, if needed, for an appropriate fee. All information we receive will be held in strictest confidence to protect your interests. **SAMPLE WILL NOT BE PROCESSED UNLESS ALL AREAS OF THIS SHEET ARE PROPERLY FILLED IN.**

Purchase Order No.

Sales Representative

ROGERS

I. Generator Information

Name of Company EXLINE
Facility Address 3256 Country Club Rd
Salina KS 67402
Mailing Address _____

Technical Contact Jim Kocherav
General Contact _____

() Check if small quantity Generator per CFR-40

US EPA ID KSD 007127327

Invoicing Information _____

Title _____ Phone (785) 913-8254683

Title _____ Phone () _____

II. Waste Stream General Information

Waste Name plant waste
Process Producing Waste processing metal parts

ANTICIPATED VOLUME _____ per year

per month _____ per week _____ one time only _____

Color _____ Odor _____

III. Waste Properties

Physical State @ 25°C

() Liquid () Powder
☒ Solid () Sludge

Layers

☒ Single Phase
() Bi-layered
() Multi-layered

Free Liquids

() Yes
☒ No

pH 4-11

Type Acid _____

Density _____

Normality _____

Type _____

Caustic _____

() Organic

☒ Inorganic

Flash Point

7140 °F

Chemical Composition (X)% () PPM
(List all known) Range

	Lower	Upper
<u>plating +</u>	()	<u>100</u>
<u>cleaning</u>	()	()
<u>scrub</u>	()	()
	()	()
	()	()
	()	()
	()	()

Metals-EP Tox Test

Arsenic (As)	<u>NC</u>
Barium (Ba)	<u>1</u>
Cadmium (Cd)	()
Chromium (Cr)	<u>7100</u>
Mercury (Hg)	<u>NC</u>

Mo or PPM

Lead (Pb)	<u>NC</u>	Nickel (Ni)	<u>NC</u>
Vanadium (V)	()	Zinc (Zn)	<u>1</u>
Selenium (Se)	<u>1</u>	Thallium (Tl)	<u>1</u>
Silver (Ag)	<u>1</u>	Cobalt (Co)	()
Copper (Cu)	()		

Possible Component (include unit of measure)

Cyanides	<u>0</u>	2, 4, D	<u>0</u>	Dioxin	<u>0</u>
Sulfides	<u>0</u>	Phenolics	<u>0</u>	Organic Chlorides	<u>0</u>

IV. PCB Oil: Type 0 Concentration % _____ % ppm _____ PCB Equip: Type _____ Concentration % _____ % ppm _____
PCB Solids: Type 0 Concentration % _____ % ppm _____ Has equipment been drained and flushed according to 40 CFR Part 761? _____

Attach information for dimensions, weight and nameplate capacity for all equipment.

V. Hazardous Characteristics (From CFR-40)

U.S. EPA Hazardous Code(s) F006

Is the waste NA () Pyrophoric () Infectious () Water reactive () Radioactive () Pathogenic
() Explosive () Pesticides/Herbicides () Biological () Shock sensitive () Etological

VI. Shipping Information (From CFR-49)

Proper DOT Shipping Name RQ HAZARDOUS WASTE SOLID N.O.S.
DOT Hazard Class ORM-E UN/NA Number NA 9185 Reportable Quantity 1 lb
Method of Shipment () Bulk Liquids () Bulk Solids
☒ Drums () Other

Special Handling and Safety Instructions _____

I certify and warrant that the above information, the information attached, and the waste stream as described is true and correct to the best of my knowledge and ability and not willful or deliberate omissions exist and that all known and/or suspected hazards have been disclosed, and a sample representative of the waste stream has been or is being sent to the proper facility. Further, I certify the samples have been collected using the appropriate EPA sampling guidelines and acknowledge that the current sample profile fee will be charged by U.S. Pollution Control, Inc. and be paid by generator.

Signature Jim Kocherav

Title Chrome Shop Supt.

Date 8-15-89

Mr. Jerry K. Exline, VP/Treasurer
Salina, KS
Page 2

2. You have been shipping your wastewater treatment sludge off-site incorrectly designated as a D007 waste. *not a ww* This waste meets the definition of wastewater treatment sludges from electroplating operations with the designation of F006. On all future shipments, the waste must be identified as a F006 waste.

You should be aware that the new land ban regulations outlined in 40 CFR Part 268 restrict certain hazardous wastes from being disposed in hazardous waste landfills without prior treatment. Eventually, all hazardous wastes will be covered by these regulations. These regulations will apply to the F006 wastes on May 8, 1990.

Your cooperation with the hazardous waste management program is appreciated. If you have questions concerning the inspection, please contact me.

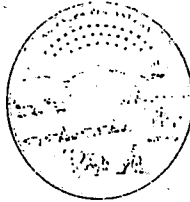
BUREAU OF WASTE MANAGEMENT

Kenneth A. Gilman

Kenneth A. Gilman
Inspections & Enforcement Section

KAG:nh

- c John P. Goetz, Hazardous Waste Section, KDHE, Topeka
Thomas Gross, Inspection and Enforcement Section, KDHE, Topeka
file



DEPARTMENT OF HEALTH AND ENVIRONMENT

Forbes Field

Topeka, Kansas 66620-0001

Phone (913) 296-1500

Mike Hayden, Governor

Stanley C. Grant, Ph.D., Secretary

Gary K. Hulett, Ph.D., Under Secretary

Northcentral District Office
2501-D Market Place
Salina, KS 67401-7699
913/827-9639

07 July 1989

Mr. Jerry K. Exline, VP/Treasurer
Exline, Inc.
3256 East Country Club Road
Post Office Box 1487
Salina, KS 67402-1487

Re: Hazardous Waste Compliance Inspection
EPA ID# KSD007127327

Mr. Exline:

On Thursday, 27 April 1989, a hazardous waste compliance inspection of your facility was conducted by this department to determine compliance with state and federal regulations concerning hazardous waste.

The inspection revealed your facility generates the following listed hazardous waste as defined by 40 CFR, Part 261, Subpart D as adopted by K.A.R. 28-31-3: wastewater treatment sludge (F006).

The quantity generated is more than 25 kilograms (approximately 55 pounds) but less than 1000 kilograms (approximately 2200 pounds) per month. Your facility is considered a Kansas generator and is regulated under K.A.R. 28-31-4 excluding K.A.R. 28-31-4(g) and K.A.R. 28-31-4(m).

As a Kansas generator, you must comply with the requirements listed on pages 7 and 8 of the enclosed Hazardous Waste Generator's Handbook. Basically, these regulations require you to obtain an EPA Identification Number, manifest wastes shipped off-site, package, label, mark, and placard all containers, maintain records, and meet storage requirements. In addition, you must conduct personnel training and meet emergency response requirements.

The inspection found your facility to be in compliance with regulations except for two items that need attention:

1. The emergency information posted by the telephone needs to be updated.

UNIFORM HAZARDOUS
WASTE MANIFEST

1. Generator's US EPA ID No.

Manifest
Document No.2. Page 1
of 1Information in the shaded areas
is not required by Federal law

3. Generator's Name and Mailing Address

EXLINE, INC.

P. O. BOX #1487 - SALINA, KS 67402-1487

4. Generator's Phone (913) 825-4583

5. Transporter 1 Company Name

USPCI

6. US EPA ID Number

01KLD011514474

7. Transporter 2 Company Name

8. US EPA ID Number

9. Designated Facility Name and Site Address

HRI

2349 N. NEW YORK AVE.

WICHITA, KS 67219-4322

10. US EPA ID Number

1KSD0007246346

A. State Manifest Document Number

B. State Generator's ID

C. State Transporter's ID

D. Transporter's Phone

E. State Transporter's ID

F. Transporter's Phone

G. State Facility's ID

H. Facility's Phone

11. US DOT Description (Provide Proper Shipping Name, Hazard Class and ID Number)

12. Containers

No.

Type

13. Total
Quantity14. Unit
Wt/Vol

Waste No.

HAZ. WASTE SOLID N.O.S.

ORM-E, NA 9189, (D007) RC=1#

4

DM

11975

P

D007

15. Additional Data provided by Manifested Above

Handling Codes for Wastes Listed Above

16. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this manifest are true and accurate, and that I have above by this manifest, and that the waste is properly packaged, labeled, and is in proper condition for transport by highway, and that I have provided the necessary information for the proper handling of the waste.

If I am a large quantity generator, I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and the best waste management method that is available to me and that I can afford.

Printed/Typed Name

Jim Kechavar

Signature

Jim Kechavar

Month Day

1/31/91

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

GARY DORMAN

Signature

Gary Dorman

Month Day

1/31/91

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day

1/31/91

19. Discrepancy in Material Shipped

Facility Owner/Operator Certification of receipt of hazardous materials received by this manifest except as noted in Item 19.

Printed/Typed Name

CHARLES R. RIZ

Signature

Charles R. Riz

Month Day

1/31/91

MATERIAL RECEIPT RECORD

Generator EXLINEManifest # 00018Date Received 5-16-89

Ticket # _____

Tanker/Man # _____

Item A: WASTE NO. Q12EPA 0007Other 891285Product H.W.S. NOSQuantity 4Drums
GallonsGravity 9010 Flash 1 1 1BSM 1 1 1Shipper ØOrganic Chlorides (Hydrocarbon layer) NEGpH (Water layer) 6.9

OK for Pumping by _____

Pumped to _____

Pumped by _____

DATE _____

Gauge Before 120

After _____

Total _____

DATE 5/16/89
N91, 842, M72Item B: WASTE NO. Q12

EPA _____

Other _____

Product _____

Quantity _____

Drums
GallonsGravity 1 1 1 Flash 1 1 1BSM 1 1 1

Organic Chlorides (Hydrocarbon layer) _____

pH (Water layer) _____

OK for Pumping by _____

Pumped to _____

Pumped by _____

DATE _____

Gauge Before _____

After _____

Total _____

Item C: WASTE NO. Q12

EPA _____

Other _____

Product _____

Quantity _____

Drums
GallonsGravity 1 1 1 Flash 1 1 1BSM 1 1 1

Organic Chlorides (Hydrocarbon layer) _____

pH (Water layer) _____

OK for Pumping by _____

Pumped to _____

Pumped by _____

DATE _____

Gauge Before _____

After _____

Total _____

Item D: WASTE NO. Q12

EPA _____

Other _____

Product _____

Quantity _____

Drums
GallonsGravity 1 1 1 Flash 1 1 1BSM 1 1 1

Organic Chlorides (Hydrocarbon layer) _____

pH (Water layer) _____

OK for Pumping by _____

Pumped to _____

Pumped by _____

DATE _____

Gauge Before _____

After _____

Total _____

Solids: Yes _____ No _____ How Many _____

(SEE NEXT PAGE)

Remarks: _____

Drums: Recycled _____

Crushed _____

By When _____

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. K S D 0 0 7 2 4 6 8 4 6										Manifest Document No. 01 29 7		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.		
		3. Generator's Name and Mailing Address Hydrocarbon Recyclers, Inc. 2549 N. New York, Wichita KS 67219												A. State Manifest Document Number				
4. Generator's Phone (316) 267-5742												B. State Generator's ID 81044						
5. Transporter 1 Company Name USPCI										6. US EPA ID Number 0 K D 9 8 1 5 1 4 4 7 4		C. State Transporter's ID 2004		D. Transporter's Phone (405) 324-5011				
7. Transporter 2 Company Name										8. US EPA ID Number		E. State Transporter's ID		F. Transporter's Phone				
9. Designated Facility Name and Site Address USPCI - Lone Mountain Box 180A, Rt. #2 Waynoka OK 73860										10. US EPA ID Number 0 K D 0 6 5 4 3 8 3 7 6		G. State Facility's ID SD 47002		H. Facility's Phone (405) 697-3237				
GENERATOR'S	11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)										12. Containers		13. Total		14. Unit		Waste No.	
											No.		Type		Quantity		Wt/Vol	
	a. <input checked="" type="checkbox"/> HM Hazardous waste solid nos ORM-E NA9189 (0004 0005 0006 0007 0008 0009 0010) 2011 RQ 100 F000										0 0 1 CM		1 2 1		Y		0004 0008 0005 0009 0006 0010 0007 0011	
	b.																	
	c.																	
d.																		
J. Additional Descriptions for Materials Listed Above LM-88-0719 SW 23800										K. Handling Codes for Wastes Listed Above								
15. Special Handling Instructions and Additional Information																		
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.																		
Printed/Typed Name James Hamilton										Signature <i>James Hamilton</i>				Month Day Year 06/22/89				
TRANSPORTER	17. Transporter 1 Acknowledgement of Receipt of Materials										Signature <i>James Hamilton</i>				Month Day Year 06/22/89			
	18. Transporter 2 Acknowledgement of Receipt of Materials										Signature				Month Day Year			
19. Discrepancy Indication Space																		
FACILITY	20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. 89-2024																	
	Printed/Typed Name Paula Miller										Signature <i>Paula Miller</i>				Month Day Year 10/12/89			

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.		Manifest Document No.		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.					
		K S D O O 7 1 2 7 3 2		7 0 0 0 1 7									
GENERATOR	3. Generator's Name and Mailing Address						A. State Manifest Document Number						
	EXLINE, INC. P. O. BOX #1487 - SALINA, KS 67402-1487						B. State Generator's ID						
	4. Generator's Phone (913) 825-4683						C. State Transporter's ID						
	5. Transporter 1 Company Name						D. Transporter's Phone						
	USPCI						E. State Transporter's ID						
	7. Transporter 2 Company Name						F. Transporter's Phone						
	9. Designated Facility Name and Site Address						G. State Facility's ID						
	HRI 2549 N. NEW YORK AVE. WICHITA, KS 67219-4322						H. Facility's Phone						
	10. US EPA ID Number						K S D O O 7 2 4 6 8 4 6						
	11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)						12. Containers		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.
a. HAZ. WASTE SOLID N.O.S. ORM-E, NA 9189, (D007) RQ=1#						1 2 D M		1 6 9 0		P		FOO9 D007	
b.													
c.													
d.													
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above							
15. Special Handling Instructions and Additional Information													
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Printed/Typed Name						Signature		Month Day Year					
JAMES L. KOCHER						James L. Kocher		03/14/89					
TRANSPORTER	17. Transporter 1 Acknowledgement of Receipt of Materials						Signature		Month Day Year				
	GARY DORMAN						Gary Dorman		03/14/89				
	18. Transporter 2 Acknowledgement of Receipt of Materials						Signature		Month Day Year				
19. Discrepancy Indication Space													
FACILITY	20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.												
	Printed/Typed Name						Signature		Month Day Year				
Daniel M. Clark						Daniel M. Clark		03/14/89					

MATERIAL RECEIPT RECORD

Generator EXLINEManifest # 00017Date Received 3-14-89

Ticket # _____

Tanker/Van # _____

Item A: WASTE NO. OklaEPA 0007Other 890700Product HWSQuantity 2

Drums

Gallons

Gravity 1.040Flash 1110BSM 1110

SNIPPER 75

Organic Chlorides (Hydrocarbon layer) NEGpH (Water layer) 7.2

OK for Pumping by _____

Pumped to _____

Pumped by _____

Gauge Before 60"

After _____

Total _____

DATE _____

Item B: WASTE NO. Okla

EPA _____

Other 891, 892, 8972

Product _____

Quantity _____

Drums

Gallons

Gravity 110Flash 1100BSM 1100

Organic Chlorides (Hydrocarbon layer) _____

pH (Water layer) _____

OK for Pumping by _____

Pumped to _____

Pumped by _____

Gauge Before _____

After _____

Total _____

DATE _____

Item C: WASTE NO. Okla

EPA _____

Other _____

Product _____

Quantity _____

Drums

Gallons

Gravity 110Flash 1100BSM 1100

Organic Chlorides (Hydrocarbon layer) _____

pH (Water layer) _____

OK for Pumping by _____

Pumped to _____

Pumped by _____

Gauge Before _____

After _____

Total _____

DATE _____

Item D: WASTE NO. Okla

EPA _____

Other _____

Product _____

Quantity _____

Drums

Gallons

Gravity 110Flash 1100BSM 1100

Organic Chlorides (Hydrocarbon layer) _____

pH (Water layer) _____

OK for Pumping by _____

Pumped to _____

Pumped by _____

Gauge Before _____

After _____

Total _____

DATE _____

Solids: Yes _____

No _____

How Many _____

(SEE NEXT PAGE)

Remarks: _____

Drums: Recycled _____

Crushed _____

By Whom _____

**UNIFORM HAZARDOUS
WASTE MANIFEST**

1. Generator's US EPA ID No.

Manifest
Document No.2. Page 1
of 1Information in the shaded areas
is not required by Federal law.

K S D O O 7 2 4 6 8 4 6 0 1 2 5 2

3. Generator's Name and Mailing Address

Hydrocarbon Recyclers, Inc.
2549 N. New York, Wichita KS 67219

4. Generator's Phone (316) 267-5742

5. Transporter 1 Company Name
USPCI

6. US EPA ID Number

O K D 9 8 1 5 1 4 4 7 4

7. Transporter 2 Company Name

8. US EPA ID Number

9. Designated Facility Name and Site Address

USPCI - Lone Mountain Facility
Box 180A, Rt. #2
Waynoka OK 73860

10. US EPA ID Number

O K D O 6 5 4 3 8 3 7 6

A. State Manifest Document Number

B. State Generator's ID

81044

C. State Transporter's ID

2004

D. Transporter's Phone (405) 324-5011

E. State Transporter's ID

F. Transporter's Phone

G. State Facility's ID

SD 47002

H. Facility's Phone

(405) 697-3237

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)

12. Containers

No.

Type

13. Total
Quantity14. Unit
Wt/Vol

1. Waste No.

a. ☒ HM

Hazardous waste solid NOS

ORM-E

NA 9189 (D004)(D005)(D006)(D007)(D008)(D009)(D010)(D011)

RR 100

2 2 1 C M

2 1

Y

D004 D008
D005 D007
D006 D009
D007 D011

b.

c.

d.

J. Additional Descriptions for Materials Listed Above

LM 88-0719

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name

Signature

Month Day Year

Stephen M Keiter

Stephen M Keiter

10/4/28/89

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

William F Hensley

William F Hensley

10/4/28/89

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

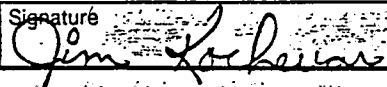
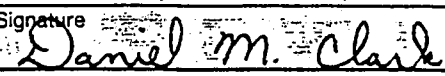
Signature

Month Day Year

Charles Leatherman

Charles Leatherman

11/4/28/89

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.		Manifest Document No.		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.	
		KSD007127327		1		00016			
3. Generator's Name and Mailing Address Exline, Inc. P. O. Box #1487 - Salina, KS 67402-1487		4. Generator's Phone (913) 825-4683		5. Transporter 1 Company Name USPC1		6. US EPA ID Number OKD981514474		A. State Manifest Document Number	
								B. State Generator's ID	
7. Transporter 2 Company Name		8. US EPA ID Number		9. Designated Facility Name and Site Address H.R.I. 2549 N. New York Avenue Wichita, KS 67219-4322		10. US EPA ID Number KSD0072-46846		C. State Transporter's ID	
								D. Transporter's Phone	
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number) HM		12. Containers No. Type		13. Total Quantity		14. Unit Wt/Vol		E. State Transporter's ID	
								F. Transporter's Phone	
15. Special Handling Instructions and Additional Information		16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.		17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name JIM KOCHVAR		Signature 		G. State Facility's ID	
								H. Facility's Phone	
18. Discrepancy Indication Space		19. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name Daniel M. Clark		Signature 		Month Day Year 12/15/88		J. Additional Descriptions for Materials Listed Above	
								K. Handling Codes for Wastes Listed Above	

MATERIAL RECEIPT RECORD

Generator EXUNE INCManifest # 00016Date Received 12/15/88

Ticket # _____

Tanker/Van # _____

Item A: WASTE NO. OklaEPA DOOF

Other _____

Product HWSNOSQuantity 2

Drums

Gallons

Gravity 1 / SOLID / 0Flash 1 / M / 0BS&W 1 / M / 0SNIPPER 0Organic Chlorides (Hydrocarbon layer) NEGpH (Water layer) 7

OK for Pumping by _____

Pumped to _____

Pumped by _____

Gauge Before _____

After _____

Total: _____

DATE

H91, SP2, m 72Item B: WASTE NO. Okla

EPA _____

Other _____

Product _____

Quantity _____

Drums

Gallons

Gravity 1 / M / 0Flash 1 / M / 0BS&W 1 / M / 0

Organic Chlorides (Hydrocarbon layer) _____

pH (Water layer) _____

OK for Pumping by _____

Pumped to _____

Pumped by _____

Gauge Before _____

After _____

Total: _____

DATE

Item C: WASTE NO. Okla

EPA _____

Other _____

Product _____

Quantity _____

Drums

Gallons

Gravity 1 / M / 0Flash 1 / M / 0BS&W 1 / M / 0

Organic Chlorides (Hydrocarbon layer) _____

pH (Water layer) _____

OK for Pumping by _____

Pumped to _____

Pumped by _____

Gauge Before _____

After _____

Total: _____

DATE

Item D: WASTE NO. Okla

EPA _____

Other _____

Product _____

Quantity _____

Drums

Gallons

Gravity 1 / M / 0Flash 1 / M / 0BS&W 1 / M / 0

Organic Chlorides (Hydrocarbon layer) _____

pH (Water layer) _____

OK for Pumping by _____

Pumped to _____

Pumped by _____

Gauge Before _____

After _____

Total: _____

DATE

Solids: Yes _____

No _____

How Many _____

(SEE NEXT PAGE)

Remarks: _____

Drums: Recycled _____

Crushed _____

By Whom _____

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. K S D 0 0 7 2 4 6 8 4 6 0 1 2 0 8		Manifest Document No. 101208		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.																																		
		3. Generator's Name and Mailing Address Hydrocarbon Recyclers Inc. 2549 N. New York, Wichita KS 67219		6. US EPA ID Number 0 K D 9 8 1 5 1 4 4 7 4		A. State Manifest Document Number		B. State Generator's ID 81044																																		
4. Generator's Phone (316) 267-5742		5. Transporter 1 Company Name USPCI		7. Transporter 2 Company Name		C. State Transporter's ID 2004		D. Transporter's Phone 405-324-5011																																		
8. US EPA ID Number		9. Designated Facility Name and Site Address USPCI - Lone Mountain Facility Box 180A, Rt. #2 Waynoka OK 73860		10. US EPA ID Number 0 K D 0 6 5 4 3 8 3 7 6		E. State Transporter's ID		F. Transporter's Phone																																		
						G. State Facility's ID SD 47002		H. Facility's Phone 405-697-3237																																		
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)		12. Containers		13. Total Quantity		14. Unit		15. Waste No.																																		
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width:5%;">HM</th> <th style="width:85%;">Description</th> <th style="width:5%;">No.</th> <th style="width:5%;">Type</th> <th style="width:5%;">Total Quantity</th> <th style="width:5%;">Unit</th> <th style="width:5%;">Wt/Vol</th> <th style="width:5%;">Waste No.</th> </tr> <tr> <td>a.</td> <td rowspan="2">X Hazardous Waste Solid NOS ORM-E NA9189 RA 100#</td> <td rowspan="2">2</td> <td rowspan="2">1</td> <td rowspan="2">1</td> <td rowspan="2">Y</td> <td rowspan="2">Y</td> <td rowspan="2">D004 D008 D005 D009 D006 D010 D007 D011</td> </tr> <tr> <td>b.</td> </tr> <tr> <td>c.</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>d.</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>		HM	Description	No.	Type	Total Quantity	Unit	Wt/Vol	Waste No.	a.	X Hazardous Waste Solid NOS ORM-E NA9189 RA 100#	2	1	1	Y	Y	D004 D008 D005 D009 D006 D010 D007 D011	b.	c.								d.															
HM	Description	No.	Type	Total Quantity	Unit	Wt/Vol	Waste No.																																			
a.	X Hazardous Waste Solid NOS ORM-E NA9189 RA 100#	2	1	1	Y	Y	D004 D008 D005 D009 D006 D010 D007 D011																																			
b.																																										
c.																																										
d.																																										
J. Additional Descriptions for Materials Listed Above LM 88-0719 SW 22180		K. Handling Codes for Wastes Listed Above																																								
15. Special Handling Instructions and Additional Information																																										
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.																																										
Printed/Typed Name Stephen M Reiter		Signature Stephen M Reiter				Month Day Year 10/22/08/9																																				
17. Transporter 1 Acknowledgement of Receipt of Materials		Printed/Typed Name Tony Holly				Signature Tony Holly																																				
18. Transporter 2 Acknowledgement of Receipt of Materials		Printed/Typed Name				Signature																																				
19. Discrepancy Indication Space																																										
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.		Printed/Typed Name Charles Leatherman				Signature Charles Leatherman																																				
						Month Day Year 12/2/08/9																																				

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.	Manifest Document No.		2. Page 1 of	Information in the shaded areas is not required by Federal law.		
3. Generator's Name and Mailing Address Exline, Inc. P. O. Box 1487 - Salina, KS 67402-1487					A. State Manifest Document Number			
4. Generator's Phone (913) 825-4683					B. State Generator's ID			
5. Transporter 1 Company Name USPC					C. State Transporter's ID			
6. US EPA ID Number OKD981514474					D. Transporter's Phone			
7. Transporter 2 Company Name					E. State Transporter's ID			
8. US EPA ID Number					F. Transporter's Phone			
9. Designated Facility Name and Site Address H.R.I. 2525 N. New York Avenue Wichita, KS 67219-4322					G. State Facility's ID			
10. US EPA ID Number KSD007246846					H. Facility's Phone			
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)					12. Containers No.	13. Total Quantity	14. Unit Wt/Vol	15. Waste No.
a. Haz Waste Solid N.O.S. ORM-E, NA 9189, (D007) RQ = 1#					5	DM	1,624	p D007
b.								
c.								
d.								
J. Additional Descriptions for Materials Listed Above					K. Handling Codes for Wastes Listed Above			
15. Special Handling Instructions and Additional Information								
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.								
Printed/Typed Name JIM KOCHVAR					Signature <i>Jim Kochvar</i>		Month Day Year 9/16/88	
17. Transporter 1 Acknowledgement of Receipt of Materials					Signature <i>Gary Dorman</i>		Month Day Year 9/16/88	
Printed/Typed Name GARY DORMAN					Signature <i>Gary Dorman</i>		Month Day Year 9/16/88	
18. Transporter 2 Acknowledgement of Receipt of Materials					Signature		Month Day Year	
Printed/Typed Name					Signature		Month Day Year	
19. Discrepancy Indication Space								
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.								
Printed/Typed Name Daniel M. Clark					Signature <i>Daniel M. Clark</i>		Month Day Year 9/16/88	

MATERIAL RECEIPT RECORD

Generator EXLINE INC

Manifest # 00015

Date Received 9-16-88

Ticket # _____

Tanker/Van # _____

Item A: WASTE NO. Okla _____ EPA 0007 Other _____ Drums _____
Product MWS NOS Quantity 5 Gallons _____
Gravity 1 / SOLID / 0 Flash 1 / M / 0 BSW 1 / M / 0 SNIPPER = 0

LANDFILL

Organic Chlorides (Hydrocarbon layer) NEG pH (Water layer) 7

OK for Pumping by _____ Pumped to _____ Pumped by 1 / _____

Gauge Before _____ After _____ Total: _____ DATE 491, 802, M72

Item B: WASTE NO. Okla _____ EPA _____ Other _____ Drums _____
Product _____ Quantity _____ Gallons _____
Gravity 1 / M / 0 Flash 1 / M / 0 BSW 1 / M / 0

Organic Chlorides (Hydrocarbon layer) _____ pH (Water layer) _____

OK for Pumping by _____ Pumped to _____ Pumped by 1 / _____

Gauge Before _____ After _____ Total: _____ DATE _____

Item C: WASTE NO. Okla _____ EPA _____ Other _____ Drums _____
Product _____ Quantity _____ Gallons _____
Gravity 1 / M / 0 Flash 1 / M / 0 BSW 1 / M / 0

Organic Chlorides (Hydrocarbon layer) _____ pH (Water layer) _____

OK for Pumping by _____ Pumped to _____ Pumped by 1 / _____

Gauge Before _____ After _____ Total: _____ DATE _____

Item D: WASTE NO. Okla _____ EPA _____ Other _____ Drums _____
Product _____ Quantity _____ Gallons _____
Gravity 1 / M / 0 Flash 1 / M / 0 BSW 1 / M / 0

Organic Chlorides (Hydrocarbon layer) _____ pH (Water layer) _____

OK for Pumping by _____ Pumped to _____ Pumped by 1 / _____

Gauge Before _____ After _____ Total: _____ DATE _____

Solids: Yes _____ No _____ How Many _____ (SEE NEXT PAGE)

Remarks: _____

Drums: Recycled _____ Crushed _____ By Whom _____

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. KSD 007 246 846		Manifest Document No. 01161		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address Hydrocarbon Recyclers Inc 2549 N. New York/Wichita KS67219						A. State Manifest Document Number			
4. Generator's Phone (316) 267 5742						B. State Generator's ID 81044			
5. Transporter 1 Company Name USPCI				6. US EPA ID Number 10KD981514474		C. State Transporter's ID 2004			
7. Transporter 2 Company Name				8. US EPA ID Number		D. Transporter's Phone 405-324-5011			
9. Designated Facility Name and Site Address USPCI - Lone Mountain Facility Box 180A Rt#2 Waynoka OKla. 73860						10. US EPA ID Number 10KD065438376		E. State Transporter's ID	
								F. Transporter's Phone	
						G. State Facility's ID 5047002			
						H. Facility's Phone 405-697-3237			
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)						12. Containers		13. Total Quantity	
						No. Type		14. Unit Wt/Vol	
a. Hazardous waste solid NOS ORM-E									
NA 9189 RQ 100#						1 CM		21 Y	
b.									
c.									
d.									
J. Additional Descriptions for Materials Listed Above LM 88-0719						K. Handling Codes for Wastes Listed Above 0004 0008 0005 0009 0006 0010 0007 0011			
15. Special Handling Instructions and Additional Information									
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.									
Printed/Typed Name Stephen M Keiter					Signature Stephen M Keiter			Month Day Year 10 25 88	
17. Transporter 1 Acknowledgement of Receipt of Materials					Signature Scott Summers			Month Day Year 10 25 88	
Printed/Typed Name Scott Summers					Signature			Month Day Year	
18. Transporter 2 Acknowledgement of Receipt of Materials					Signature			Month Day Year	
Printed/Typed Name					Signature			Month Day Year	
19. Discrepancy Indication Space									
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.									
Printed/Typed Name Charles Leatherman					Signature Charles Leatherman			Month Day Year 10 25 88	

OCT 31 1989

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Mr. Chuck Trombold
General Manager
Hydrocarbon Recyclers, Inc.
2525 North New York
Wichita, Kansas 67219

REQUEST FOR INFORMATION

Dear Mr. Trombold:

Under § 3007 of the Resource Conservation and Recovery Act (RCRA), Title 42 U.S.C. § 6927, the Environmental Protection Agency (EPA) may require you to furnish information relating to wastes and waste management practices at your facility. Pursuant to § 3007 of RCRA, for the purposes of determining compliance and possible enforcement, EPA hereby requires that you respond to the following questions in writing within fifteen (15) days of receipt of this letter.

Information Requested

1. For each hazardous waste received by HRI from Exline, Inc. of Salina, Kansas, between August 8, 1988 and the present, provide to EPA copies of all notifications, demonstrations, waste analysis data, and other documentation produced by Exline pursuant to 40 CFR § 268.7.
2. For each hazardous waste received by HRI from Exline, Inc. between August 8, 1988 and the present, provide to EPA copies of any and all analysis done according to HRI's waste analysis plan.
3. For each hazardous waste received by HRI from Exline, Inc., between August 8, 1988 and the present, provide to EPA a description of any treatment received by the waste and ultimate disposition of the waste.
4. Provide to EPA a copy of all manifests for offsite shipments of waste from HRI to a disposal facility. This request is limited to Exline's waste and any waste it was comingled with, received by HRI between August 8, 1988 and the present.

WSTM/RCRA/RCOM:HUTCHISON:jh:10/30/89

RCOM	RCOM	RCRA
HUTCHISON	DOYLE	SANDERSON

CH 10-30-89

D. Doyle
10/30/89

MS
10/31/89

lc

You may, if you desire, assert a business confidentiality claim covering part or all of the information submitted to, or reviewed by, EPA. Such a claim may be made by placing on (or attaching to) the information, at the time of its submittal to, or review by EPA, a cover sheet, stamped or printed legend, or other suitable form of notice employing language such as "trade secret," "proprietary," or "company confidential." Allegedly confidential portions of otherwise non-confidential documents should be clearly identified and may be submitted separately to facilitate identification and handling by EPA. If confidential treatment is sought only until a certain date or until the occurrence of a certain event, the request should so state.

Information submitted for which a claim of confidentiality is made will be disclosed by EPA only to the extent and by the means authorized by the procedures specified in 40 CFR Part 2, Subpart B (1985), as amended by 50 Federal Register 51654 December 18, 1985. If no such claim is made when information is received by EPA, the information may be made available to the public without further notice.

Please note that you are required to submit this information within fifteen (15) days of receipt of this letter. The response must be submitted to:

U.S. Environmental Protection Agency
726 Minnesota Avenue
Kansas City, Kansas 66101
Attn: C.L. Hutchison, RCRA/RCOM

Should you require a longer period to respond to the information request, you may be granted a one-time extension of 15 days. To request an extension you must contact Cynthia L. Hutchison at (913) 236-2891.

Failure to respond to these questions within 15 days of receipt of this letter may subject you to an enforcement action under § 3008 of RCRA, 42 U.S.C. § 6928. Such enforcement action may include the assessment of penalties of up to \$25,000 for each day of noncompliance.

Should you have any questions concerning this matter, please contact Cynthia L. Hutchison, of my staff, at (913) 236-2891.

Sincerely yours,

Michael J. Sanderson
Chief, RCRA Branch

cc: Tom Gross, KDHE

bcc: A. Hancock, RCOM

P 073 985 617

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

(See Reverse)

Sent to

Mr. Chuck Trombold

Street and No.

General Manager

P.O., State and Zip Code

2525 N. New York

Postage

Wichita, Kansas \$ 67219

Certified Fee

Special Delivery Fee

Restricted Delivery Fee

Return Receipt showing
to whom and Date Delivered

Return Receipt showing to whom,
Date, and Address of Delivery

TOTAL Postage and Fees

\$

Postmark or Date

PS Form 3800, June 1985

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

Environmental Protection Agency
WSTM/RCRA/CMPL
726 Minnesota Avenue
Kansas City, Kansas 66101

CYNTHIA

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

Mr. Chuck Trombold
General Manager
Hydrocarbon Recyclers, Inc.
2525 N. New York
Wichita, Kansas 67219

4. Article Number

P 073 985 617

Type of Service:

- | | |
|---|--|
| <input type="checkbox"/> Registered | <input type="checkbox"/> Insured |
| <input checked="" type="checkbox"/> Certified | <input type="checkbox"/> COD |
| <input type="checkbox"/> Express Mail | <input type="checkbox"/> Return Receipt
for Merchandise |

Always obtain signature of addressee
or agent and DATE DELIVERED.

5. Signature — Address

X

6. Signature — Agent

X

7. Date of Delivery

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8. Addressee's Address (ONLY if
requested and fee paid)